

Return Form To: Secretary of State Lobbying Section, Elections Division 1700 Broadway, Suite 270 Denver, Colorado 80290 (303) 894-2200 X6304 FAX (303) 869-4861

## STATE FISCAL YEAR CUMULATIVE DISCLOSURE STATEMENT [Due upon Termination or before July 15 of the next year - CRS 24-6-302(3)(b)]

1. NAME OF LOBBYIST OR FIRM ORGANIZED FOR PROFESSIONAL LOBBYING PURPOSES:	
2. ADDRESS (Number, Street, City, State and Zip Code)	
3. TELEPHONE #FAX #	e-mail ADDRESS
4. SUMMARY OF GROSS INCOME RECEIVED FOR SUBCONTRACTED LOBBYING BUSINESS (INCOME ANOTHER LOBBYIST OR FIRM) Please use Addendum blobbying business that was subcontracted.	CONTEMPORANEOUSLY REPORTED BY
NAME OF EACH PERSON FROM WHOM LOBBYIST RECEIVED INCOME ("Person" means an individual, limited liability company, partnership, committee, association, corporation, or any other organization or group of persons.)	AMOUNT OF GROSS INCOME ("Gross income" means the total amount of compensation, fees, and other payments (before any deductions) that is received for lobbying by either a professional lobbyist or a firm organized for professional lobbying purposes that employs a professional lobbyist.)
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
TOTAL	\$
(Use additional pages if n ADDENDUM SUMMARY OF GROSS INCOME RECEIV BUSINESS (INCOME CONTEMPORANEOUSLY REPORTED I	ED FOR SUBCONTRACTED LOBBYING
1.	\$
2.	\$
3.	\$
4.	\$
TOTAL	\$
(Use additional pages if n	ecessary.)
I,	ontents of this fiscal year cumulative disclosure cation is made under the penalties of perjury in
Signature of Professional Labbuist or Person Disclosing	